

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

CASE MANAGEMENT SERVICES

- (7) analyzing and planning for the service needs of mentally retarded persons
 - (8) formulating, writing and implementing individualized consumer service plans to promote goal attainment for individuals with mental retardation
 - (9) using assessment tools.
 - c. Abilities to:
 - (1) demonstrate a positive regard for consumers and their families (e.g., treating consumers as individuals, allowing risk taking, avoiding stereotypes of mentally retarded people, respecting consumers' and families' privacy, believing consumers can grow)
 - (2) be persistent and remain objective
 - (3) work as team member, maintaining effective inter- and intra-agency working relationships
 - (4) work independently, performing positive duties under general supervision
 - (5) communicate effectively, verbally and in writing
 - (6) establish and maintain ongoing supportive relationships.
- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of §1902(a)(23) of the Act.
 - 1. Eligible recipients will have free choice of the providers of case management services.
 - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan shall not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

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§6. Case Management for the Elderly.

- A. Target Group: Persons age 60 and over who have been screened through a Case Management Pilot Project approved by the Long-Term Care Council and found to be dependent in 2 or more of the following activities of daily living: (a) bathing, (b) dressing, (c) toileting, (d) transferring, (e) continence, or (f) eating.
- B. Areas of State in which services will be provided:
- ☐ Entire State
- ☒ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:
- a. Fairfax County, and the cities of Falls Church and Fairfax;
- c. Planning Districts 1, 2, 3 (except for Washington County and the City of Bristol), 4, 17, 18, 22, 23.
- C. Comparability of Services
- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.
- D. Definition of Services:
1. Assessment: Determining client's service needs, which include psychosocial, nutritional and medical.
2. Service Planning: Developing an individualized description of what services and resources are needed to meet the service needs of the client and help access those resources.

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3. Coordination & Referral: Assisting the client in arranging for appropriate services and ensuring continuity of care.
 4. Follow-up & Monitoring: Assessing ongoing progress, ensuring services are delivered, and periodically reassessing need to determine appropriate revisions to the case management plan of care.
- E. Qualifications of Providers. To qualify as a provider of case management for the elderly, the provider of services must ensure that claims are submitted for payment only when the services were performed by case managers meeting these qualifications. The case manager must possess a combination of work experience or relevant education which indicates that the individual possesses the following knowledge, skills, and abilities. The case manager must have these knowledge, skills, and abilities at the entry level which must be documented or observable in the application form or supporting documentation or in the interview (with appropriate documentation).
1. Knowledge of:
 - a. Aging and the impact of disabilities and illnesses on aging;
 - b. Conducting client assessments (including psychosocial, health and functional factors) and their uses in care planning;
 - c. Interviewing techniques;
 - d. Consumers' rights;
 - e. Local human and health service delivery systems, including support services and public benefits eligibility requirements;
 - f. The principles of human behavior and interpersonal relationships;
 - g. Effective oral, written, and interpersonal communication principles and techniques;
 - h. General principles of record documentation;
 - i. Service planning process and the major components of a service plan.

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2. Skills in:
 - a. Negotiating with consumers and service providers;
 - b. Observing, recording and reporting behaviors;
 - c. Identifying and documenting a consumer's needs for resources, services and other assistance;
 - d. Identifying services within the established services system to meet the consumer's needs;
 - e. Coordinating the provision of services by diverse public and private providers;
 - f. Analyzing and planning for the service needs of elderly persons;
3. Abilities to:
 - a. Demonstrate a positive regard for consumers and their families;
 - b. Be persistent and remain objective;
 - c. Work as a team member, maintaining effective inter- and intra-agency working relationships;
 - d. Work independently, performing position duties under general supervision;
 - e. Communicate effectively, verbally and in writing.
 - f. Develop a rapport and to communicate with different types of persons from diverse cultural backgrounds;
 - g. Interview.
4. Individuals meeting all the above qualifications shall be considered a qualified case manager; however, it is preferred that the case manager possess a minimum of an undergraduate degree in a human services field, or be a licensed nurse. In addition, it is preferable that the case manager have two years of satisfactory experience in the human services field working with the elderly.

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- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of §1902(a)(23) of the Act.
 - 1. Eligible recipients will have free choice of the providers of case management services.
 - 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.
- H. Case Management services to the elderly shall be limited to no more than 6 months without authorization from the Department of Medical Assistance Services.

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§7. Case Management for Recipients of Auxiliary Grants.

- A. Target Group: Recipients of Optional State Supplements (Auxiliary Grants) as defined in 12VAC30-40-350 (Attachment 2.6B), who reside in licensed adult care residences.
- B. Areas of State in which services will be provided:
- ☒ Entire State.
- ☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide.
- C. Comparability of Services:
- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.
- D. Definition of Services:

The case management services will provide assessment, service location, coordination and monitoring for aged, blind and disabled individuals who are applying for or receiving an optional state supplement (Auxiliary Grant) to pay the cost of residential or assisted living care in a licensed adult care residence in order to facilitate access to and receipt of the most appropriate placement. In addition, the case management services will provide for periodic reassessment to determine whether the placement continues to meet the needs of the recipient of optional state supplement (Auxiliary Grant) and to arrange for transfer to a more appropriate placement or arrange for supplemental services as the needs of the individual change.

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- E. Qualifications of Providers. A qualified case manager for recipients of Auxiliary Grants must be a qualified employee of a human service agency as required in §63.1-25.1 of the Code of Virginia. To qualify as a provider of case management for Auxiliary Grant recipients, the human service agency:
- (1) must employ or contract for case managers who have experience or have been trained in establishing, and in periodically reviewing and revising, individual community care plans and in the provision of case management services to elderly persons and to disabled adults;
 - (2) must have signed an agreement with the Department of Medical Assistance Services to deliver case management services to aged, blind and disabled recipients of optional state supplements (Auxiliary Grants);
 - (3) shall have written procedures for assuring the quality of case management services, and
 - (4) must ensure that claims are submitted for payment only when the services were performed by case managers meeting these qualifications. The case manager must possess a combination of work experience in human services or health care and relevant education which indicates that the individual possesses the following knowledge, skills, and abilities at entry level. These must be documented on the job application form or supporting documentation.
1. Knowledge of:
- a. Aging;
 - b. The impact of disabilities and illnesses on elderly and non-elderly persons;
 - c. Conducting client assessments (including psychosocial, health and functional factors) and their uses in care planning;
 - d. Interviewing techniques;

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- e. Consumers' rights;
 - f. Local human and health service delivery systems, including support services and public benefits eligibility requirements;
 - g. The principles of human behavior and interpersonal relationships;
 - h. Effective oral, written, and interpersonal communication principles and techniques;
 - i. General principles of record documentation;
 - j. Service planning process and the major components of a service plan.
2. Skills in:
- a. Negotiating with consumers and service providers;
 - b. Observing, recording and reporting behaviors;
 - c. Identifying and documenting a consumer's needs for resources, services and other assistance;
 - d. Identifying services within the established services system to meet the consumer's needs;
 - e. Coordinating the provision of services by diverse public and private providers;
 - f. Analyzing and planning for the service needs of elderly or disabled persons;

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3. Abilities to:
 - a. Demonstrate a positive regard for consumers and their families;
 - b. Be persistent and remain objective;
 - c. Work as a team member, maintaining effective inter- and intra-agency working relationships;
 - d. Work independently, performing position duties under general supervision;
 - e. Communicate effectively, verbally and in writing;
 - f. Develop a rapport and to communicate with different types of persons from diverse cultural backgrounds;
 - g. Interview.
 4. Individuals meeting all the above qualifications shall be considered a qualified case manager; however, it is preferred that the case manager possess a minimum of an undergraduate degree in a human services field, or be a licensed nurse. In addition, it is preferable that the case manager have two years of experience in the human services field working with the aged or disabled.
 5. To obtain DMAS payment, the case management provider must maintain in a resident's record a copy of the resident's assessment, plan of care, all reassessments, and documentation of all contacts, including but not limited to face-to-face contacts with the resident, made in regard to the resident.
- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of §1902(a)(23) of the Act.

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- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.
- H. Payment for case management services are limited to no more than one visit during each calendar quarter. In order to bill for case management services during a calendar quarter, the case manager must comply with the documentation requirements of E[.5.] above and have documented contact with the resident during that quarter.

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